

## BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM CALCULATION SHEET (FOR USE WITH FORM PTO-875)								SEARCHED	INDEXED	SERIALIZED	FILED	FILING DATE						
								APPLICANT(S)										
								10/542599										
												CLAIMS						
AS FILED				AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT						AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT		
	IND.	DEP.		IND.	DEP.		IND.	DEP.		IND.	DEP.		IND.	DEP.		IND.	DEP.	
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47										97								
48										98								
49										99								
50										100								
TOTAL IND.	2																	
TOTAL DEP.	36																	
TOTAL CLAIMS	38																	